DOL-UID-21A (10/99)

UNEMPLOYMENT INSURANCE DIVISION OF SOUTH DAKOTA Employer's Report of Wages Paid to Each Employee Continuation Sheet

PLEASE TYPE THIS REPORT

1. Account No. Quarter/Year		
15. Employee's Social Security Number16. Employee's Name (Last, First)	17. Total Gross Wages Paid	18. Excess Wages This Quarter
	. 	
	. 	
19. Total Gross Wages This Page	20. Total Excess This Page	